

To talk to someone who understands, contact:

Postpartum Health Alliance of Northern California

1-888-773-7090 (9 a.m.-9 p.m. Pacific time)
Talk to mothers who have recovered from PPD
www.parentspress.com/pardepression.html#anchor1636579

Postpartum Support International

1-800-944-4PPD or 1-800-944-4773
(9 a.m.-3 p.m. Pacific time)
www.postpartum.net/index.html

For more information:

American Foundation for Suicide Prevention

1-888-333-2377
www.afsp.org

American Psychological Association

www.apa.org/pi/wpo/postpartum.html

Health Resources and Services Administration

www.mchb.hrsa.gov/pregnancyandbeyond/depression

MedEdPPD

Developed with the NIMH
In English/en Espanol
www.mededppd.org

National Women's Health Center

www.4woman.gov

New Jersey Speak Up When You're Down

Information and New Jersey helpline
www.state.nj.us/health/fhs/ppd

Online PPD Support Group

www.ppdsupportpage.com

The American Psychological Association (APA), located in Washington, DC, is the largest scientific and professional organization representing psychology in the United States. Its membership includes 148,000 researchers, educators, clinicians, consultants, and students. APA works to advance psychology as a science and profession and as a means of promoting health, education, and human welfare.

American Psychological Association
Public Interest Directorate, Women's Programs Office
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Postpartum Depression



“What’s the matter with me?”

“I thought this would be the happiest time in my life but I’m so sad.”

“I’m so scared I might accidentally hurt the baby.”

“I feel like I’m going crazy.”



AMERICAN PSYCHOLOGICAL ASSOCIATION

What Is Postpartum Depression & Anxiety?

It’s common for women to experience the “baby blues” — feeling stressed, sad, anxious, lonely, tired, or weepy — following their baby’s birth. But some women — up to 1 in 7 — experience a much more serious mood disorder — postpartum depression. (Postpartum psychosis, a condition that may involve psychotic symptoms like delusions or hallucinations, is a different disorder and is very rare.)

Unlike the baby blues, PPD doesn’t go away on its own. It can appear days or even months after delivering a baby; it can last for many weeks or months if left untreated. PPD can make it hard for you to get through the day, and it can affect your ability to take care of your baby, or yourself.

PPD can affect any woman — women with easy pregnancies or problem pregnancies, first-time mothers and mothers with one or more children, women who are married and women who are not, and regardless of income, age, race or ethnicity, culture, or education.



What Are the Symptoms of PPD?

The warning signs are different for everyone but may include:

- a loss of pleasure or interest in things you used to enjoy, including sex
- eating much more, or much less, than you usually do
- anxiety — all or most of the time — or panic attacks
- racing, scary thoughts
- feeling guilty or worthless — blaming yourself
- excessive irritability, anger, or agitation — mood swings
- sadness, crying uncontrollably for very long periods of time
- fear of not being a good mother
- fear of being left alone with the baby
- misery
- inability to sleep, sleeping too much, difficulty falling or staying asleep
- disinterest in the baby, family, and friends
- difficulty concentrating, remembering details, or making decisions
- thoughts of hurting yourself or the baby (see inside this brochure for numbers to call to get immediate help).

If these warning signs or symptoms last longer than 2 weeks, you may need to get help.

Whether your symptoms are mild or severe, recovery is possible with proper treatment.

What Are the Risk Factors for PPD?

- a change in hormone levels after childbirth
- previous experience of depression or anxiety
- family history of depression or mental illness
- stress involved in caring for a newborn and managing new life changes
- having a challenging baby who cries more than usual, is hard to comfort, or whose sleep and hunger needs are irregular and hard to predict
- having a baby with special needs (premature birth, medical complications, illness)
- first-time motherhood, very young motherhood, or older motherhood
- other emotional stressors, such as the death of a loved one or family problems
- financial or employment problems
- isolation and lack of social support



How Common Is PPD?

- Up to 1 in 7 women experience PPD
- For half of women diagnosed with PPD, this is their first episode of depression
- About half of women who are later diagnosed with PPD may have begun experiencing symptoms during pregnancy — so it's important to seek help early!

Getting the right help can make all the difference for you, your baby, and your family.

What Can I Do?

- Don't face PPD alone — Seek help from a psychologist or other licensed mental health provider; contact your doctor or other primary health care provider.
- Talk openly about your feelings with your partner, other mothers, friends, and relatives.
- Join a support group for mothers — ask your health care provider for suggestions if you can't find one.
- Find a relative or close friend who can help you take care of the baby.
- Get as much sleep or rest as you can even if you have to ask for more help with the baby — if you can't rest even when you want to, tell your primary health care provider.
- As soon as your doctor or other primary health care provider says it's ok, take walks, get exercise.
- Try not to worry about unimportant tasks — be realistic about what you can really do while taking care of a new baby.
- Cut down on less important responsibilities.

Postpartum depression is not your fault — it is a real, but treatable, psychological disorder.

If you are having thoughts of hurting yourself or your baby, take action now:

Put the baby in a safe place, like a crib. Call a friend or family member for help if you need to.

- Call a suicide hotline (free & staffed all day, every day):

National Hopeline Network
1-800-SUICIDE (1-800-784-2433)
www.hopeline.com

National Strategy for Suicide Prevention: LifeLine
1-800-273-TALK (1-800-273-8255)
Has hotlines for every state
www.mentalhealth.samhsa.gov/suicideprevention

PPD Moms
1-800-PPDMOMS (1-800-773-6667)
www.1800ppdmoms.org

- Call your psychologist's or other licensed mental health provider's emergency number.
- Call your doctor's or other primary health care provider's emergency number.
- Go to your local hospital emergency room.

Tell someone you trust about what you are feeling; ask him or her to help you take these steps.

*Adapted from MedEdPPD
(www.mededppd.org/mothers/get_help.asp)
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The Good News: There Is Hope PPD Can Be Treated! You Can Feel Better!

- Early detection and treatment make all the difference.
- If you or someone you know shows symptoms of depression and anxiety like the ones discussed here — either during pregnancy or after childbirth — a psychologist or other licensed mental health provider can help.
- Effective treatments for PPD include various forms of psychotherapy, often combined with antidepressant medication. You will learn how to develop skills to manage feelings and cope with problems.
- Don't wait — Take action and seek treatment as soon as you notice any of these physical or emotional symptoms. PPD can get worse without treatment.

To find a psychologist or other licensed mental health provider near you, ask your ob/gyn, pediatrician, midwife, internist, or other primary health care provider for a referral.

The **American Psychological Association's Consumer Help Center** can also help you find a local psychologist: Call 1-800-964-2000, or visit APA's online help center: www.apahelpcenter.org/

